

# Work Order ID 93807

**\*93807\***

Page 1

November-27-12 11:26:46 AM

Item ID: D212-664-101

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Crosstube Fwd High

Start Date: 11/27/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: MLS

Date: 12-11-28 Tooling:

Date:

Run Start **\*NR1\***

QC:

Date: SPC (Y/N):

Date:

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
<b>Draw Nbr</b>	<b>Revision Nbr</b>								
D212-664-141	Rev D (DEO)								
100	DOCUMENT CONTROL	0.00							
<b>*100*</b>									
DC	Memo	0.00							
Document Control	Photocopy bluefile and create labels as per PPP D212-664-101								
110	Pick Kit	0.00							
<b>*110*</b>	Packaging								
Packaging	Memo	0.00							
Packaging									
120	BENDING MACHINE - CROSSTUBES	0.00							
<b>*120*</b>									
CNC Bend 2	Memo	0.00							
CNC Alpha 160 Bender	Bend tube as per Dwg D212-664-141 using CNC bender program 212-fw and Folio D212-664-101								

MLS 13-01-04

MO 12/12/06

Rm 12-12-6

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Work Order ID 93807

November-27-12 11:26:46 AM

\*93807\*

Page 2

Item ID: D212-664-101 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Crosstube Fwd High  
 Start Date: 11/27/12 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 12/07/12 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* QC Quality Control	QC15- Crosstube Dimensional Check  Memo	0.00 0.00							
140 *140* Crosstubes Crosstubes	Crosstubes  Memo 1-Drill pilot holes in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549,using drill table DT8577,set-up towers in hole #7 as per QSI 10  2-Ream hole to finish size in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549.Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.  3-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-141  4-*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D212-664-141	0.00 0.00							

MO/BM, 12/12/10  
 MO 12/12/10

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

# Work Order ID 93807

\*93807\*

Page 3

November-27-12 11:26:46 AM

Item ID: D212-664-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Fwd High

Start Date: 11/27/12 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start \*NR1\*

QC: Date: SPC (Y/N): Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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150

QC5- Inspect part completeness to step on W/O

0.00

\*150\*

QC

Memo

0.00

Quality Control

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

160

0.00

\*160\*

HandFXtube

Memo

0.00

Hand Finishing Crosstubes

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

1- CLEAN CROSSTUBE WITH WASH'N WIPE

170

Outsource process - NDT per QSI038 4.1

0.00

\*170\*

Outsource2

Memo

0.00

Outsource process - NDT

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

Liquid Penetrant Inspection as per QSI 038

Issue P/O: 18621

LPI as per ASTM 1417 Level 2

Attach copy of NDT results to work order

1 0 0 12-12-11

CL 12/12/11 ①

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

# Work Order ID 93807

\*93807\*

Page 4

November-27-12 11:26:46 AM

Item ID: D212-664-101 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Crosstube Fwd High  
 Start Date: 11/27/12 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 12/07/12 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180 *180* Packaging Packaging	Receive & Inspect for Damage & Mat'l Certs Packaging Memo Ensure copy of NDT results attached to work order.	0.00 0.00				1X			SP 12-12-11
190 *190* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Inspect for damage & ensure results are as per Dwg D212-664-141	0.00 0.00							(DAS) 16 8-8-12
193 *193* HandFXtube Hand Finishing Crosstubes	Crosstubes Chemical Conversion Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** 1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE BEFORE CHEMICAL CONVERSION	0.00 0.00				1	Ø	Ø	AD 12-12-11

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		



# Work Order ID 93807

\*93807\*

Page 5

November-27-12 11:26:46 AM

Item ID: D212-664-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Fwd High

Start Date: 11/27/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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195

QC7-Inspect Chemical Conversion Coat

0.00

(DAS 16 12/12/14)

\*105\*

QC

Memo

0.00

Quality Control

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

200

Spray Painting per QSI005 4.2

0.00

\*200\*

SprayPaint

SprayPaint

Memo

0.00

Spray Painting

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

1-Prime inside and outside crosstube as per QSI 005 4.2

2-\*\*\*\* ENSURE TO MASK THE WINDOW AS PER DEO\*\*\*\*

3-Paint outside crosstube as per DEO D212-667-141 with White Imron as per QSI 005 4.2

PRIME: 122833

Start Time: 1:00

Finish Time: 1:40

clear 121625

PAINT: 123591

Start Time: 6:00

Finish Time: 6:45

1 0 0 A9 12-12-12

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Work Order ID 93807

\*93807\*

Page 6

November-27-12 11:26:46 AM

Item ID: D212-664-101

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Fwd High

Start Date: 11/27/12 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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210

QC14- Inspect Spray Paint

0.00

\*210\*

QC

Memo

0.00

Quality Control

Then, Wrap in plastic bag to protect from scratches

DAS  
05  
9-89 12.12.12

220

Crosstubes

0.00

\*220\*

Crosstubes

Memo

0.00

Crosstubes

1-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe

2-Install supports with Proseal 890 per DSI9563 and QSI 015

A/R Proseal 890 Batch: 123831

3- Torque bolts as per dwg

DAS  
05  
9-89 12.12.19

230

QC6- Inspect dimensions to drawing

0.00

\*230\*

QC

Memo

0.00

Quality Control

DAS  
15  
9-89 12.12.12

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Work Order ID 93807

**\*93807\***

Page 7

November-27-12 11:26:46 AM

Item ID: D212-664-101 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Crosstube Fwd High  
 Start Date: 11/27/12 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 12/07/12 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
240	Pick Kit	0.00							
<b>*240*</b>									
Packaging	Memo	0.00				1			13/01/04 JB
Packaging									
250	QC4- 100% Inspect kits for completeness	0.00				1			
<b>*250*</b>									
QC	Memo	0.00							
Quality Control									
260	Packaging	0.00							
<b>*260*</b>									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D212-664-101								

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

**Work Order ID 93807****\*93807\***

Page 8

November-27-12 11:26:46 AM

Item ID: D212-664-101

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Crosstube Fwd High

Start Date: 11/27/12 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 12/07/12 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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270

QC21- Final Inspection - Work Order Release

0.00

**\*270\***

QC

Memo

0.00

Quality Control

MLJ 13-01-08  
MLJ 13-01-08

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other



# Picklist Print

November-27-12 11:26:46 AM

Page 1

Work Order ID: 93807

Parent Item: D212-664-101

Start Date: 11/27/12

Required Date: 12/07/12

Parent Item Name: Crosstube Fwd High

Start Qty: 1.00

Required Qty: 1.00

**Comments:**

IPP Rev:E04.02.16ReformatKJ/DS

IPP Rev:F 06-03-29 Remove Coments on Pick List JLM

IPP Rev:G 07-04-30 As per Rev C

JLM

IPP Rev:H 11.04.26 inspection

strip ecn 11-549 EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
<b>D212-664-101TRN</b> Crosstube Turning Detail		Manufactured	No			110	Each	5.0000	1	1			

Location

Loc Qty

Loc Code

FG046



2

68584

0

92718

1

92856

1

LG014

3

92717

1

92857

1

92858

1

①

MO 12/12/06

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other

# Picklist Print

November-27-12 11:26:46 AM

Page 2

Work Order ID: 93807

Parent Item: D212-664-101

Start Date: 11/27/12

Required Date: 12/07/12

Parent Item Name: Crosstube Fwd High

Start Qty: 1.00

Required Qty: 1.00

D3595-063-450

Manufactured No

230

Each

185.8895

4

4.2105263

RUBBER CUSHION

12.12.19

R# 92887

## Location

## Loc Qty

## Loc Code

FG

5

88422

5

LG051

153.78

80161

1.7

82511

0.28

84715

2

87478

130

88916

1.8

90968

18

MAT052

27.109474

67353

2

68893

6

70113

0.56

71354

0.2

74113

0.349474

75597

1

92056

17

November-27-12 11:26:46 AM

Shop Packet Print

Page 2

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

November-27-12 11:26:46 AM

Page 3

Work Order ID: 93807

Parent Item: D212-664-101

Start Date: 11/27/12

Required Date: 12/07/12

Parent Item Name: Crosstube Fwd High

Start Qty: 1.00

Required Qty: 1.00

MS21920-25

Purchased

No

220

Each

75.0000

4

4

Clamp(per MIL-DTL-8783C)

W 12.12.19

## Location

## Loc Qty

## Loc Code

FG

2

120920

2

LG050

70

116264

2

117998

4

118142

4

119339

2

119746

2

120475

3

120920

7

123243

46

LG051

3

122838

3

D2893-1

Manufactured

No

220

Each

21.0000

2

2

2.75 Support

W 12.12.19

## Location

## Loc Qty

## Loc Code

LG052

21

72865

2

87289

3

89624

16

B#92823

D342891

Manufactured

No

240

Each

14.0000

1

1

Placard

JB 13-01-04

## Location

## Loc Qty

## Loc Code

ST045

14

93489

14

93489

November-27-12 11:26:46 AM

Shop Packet Print

Page 3

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Picklist Print

November-27-12 11:26:46 AM

Page 4

Work Order ID: 93807

Parent Item: D212-664-101

Start Date: 11/27/12

Required Date: 12/07/12

Parent Item Name: Crosstube Fwd High

Start Qty: 1.00

Required Qty: 1.00

**AV6-35A**  
BOLT

Purchased No

240 Each 34.0000

4

123831 20



SMD

Location	Loc Qty	Loc Code
ST340	34	
121181	1	
122416	13	
122800	20	

**AV6-36A**  
Bolt

Purchased No

240 Each 43.0000

4

123831 20



SMD

Location	Loc Qty	Loc Code
ST340	43	
118422	2	
119449	1	
120187	4	
120423	3	
122416	3	
122993	30	

**MS21042B6**  
Nut

Purchased No

240 Each 770.0000

6

6

20



SMD

Location	Loc Qty	Loc Code
314	31	
122441	31	
ST300	239	
117677	25	
118384	3	
118927	48	
119075	4	
120308	159	
ST314	500	
123248	350	
123355	150	

120308

**AN960JD616**  
Washer

NAS1149D0663J

Purchased No

240 Each 0.0000

18

18

123265 20 12-01-04



SMD

November-27-12 11:26:46 AM

Shop Packet Print

Page 4

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

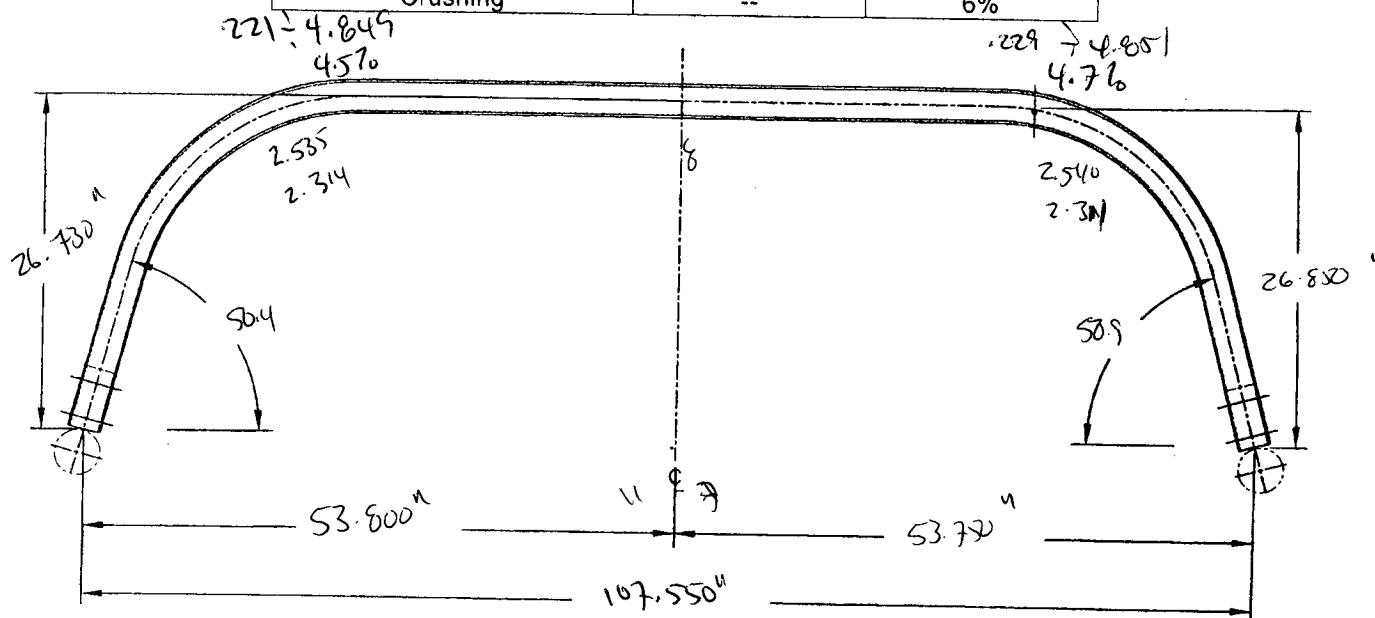
### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		



DART AEROSPACE LTD		Work Order:	93807
Description: Crosstube High Fwd (205/212/412)		Part Number:	D212-664-101
Inspection Dwg: D212-664-141 Rev: D		Page 1 of 1	

Required Dimension	Min	Max
Height	26.79	27.05
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.7
Bending Passes	3	--
Crushing	--	6%



	Side A	middle	Side B
Bending Passes	11	8	7
Crushing	4.57		4.77
Comments			
Side A = 4.57% crushing @ 11 Passes.			
Middle = 8 Passes			
Side B = 4.77% crush @ 7 Passes.			

QC15 Inspection	DAS
Date	16 17/17/06

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	08.04.21	Dwg Rev updated	KJ/JM	
C	10.04.01	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing dimensions	KJ	

Item	Qty -141	Qty -141B	Part Number	Description
1	X		D212-664-141	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD)
2		X	D212-664-141B	CROSSTUBE ASSEMBLY (214 HIGH FWD)
3	1	1	D6005-128	CROSSTUBE
4	2	2	D2893-1	SUPPORT
5	4	4	D3595-063-450	RUBBER CUSHION
6	4	4	MS21920-25	CLAMP (OR MS21920-26)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

# **GENERAL NOTES:**

- MATERIAL: MANUFACTURED FROM D6005-128  
FINISHED LENGTH = 126.514±0.020
- FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- UNITS: INCHES UNLESS OTHERWISE NOTED.
- BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF  
USING VIBRATING STYLUS
- WEIGHT: D212-664-141 = 33.6 lbs (PER IIN-D212-664)  
D212-664-141B = 33.6 lbs (PER IIN-D212-664)
- PART IS SYMMETRIC ABOUT CENTERLINE.
- RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY. TRANSITION SHOULD BE SMOOTH.
- BEND PROGRESSIVELY WITH A MINIMUM OF 3 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- INSTALL MS21920-25 CLAMPS (OR -26) WITH D3595-063-450 RUBBER CUSHIONS TO SECURE THE D2893-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

93807 MJS  
12-11-28

REMOVED FROM UNDER REVIEW PER  
**UNDER REVIEW** EGN# 11-614  
11/26/15  
FOR PRO-DEVELOPMENT JOURNAL

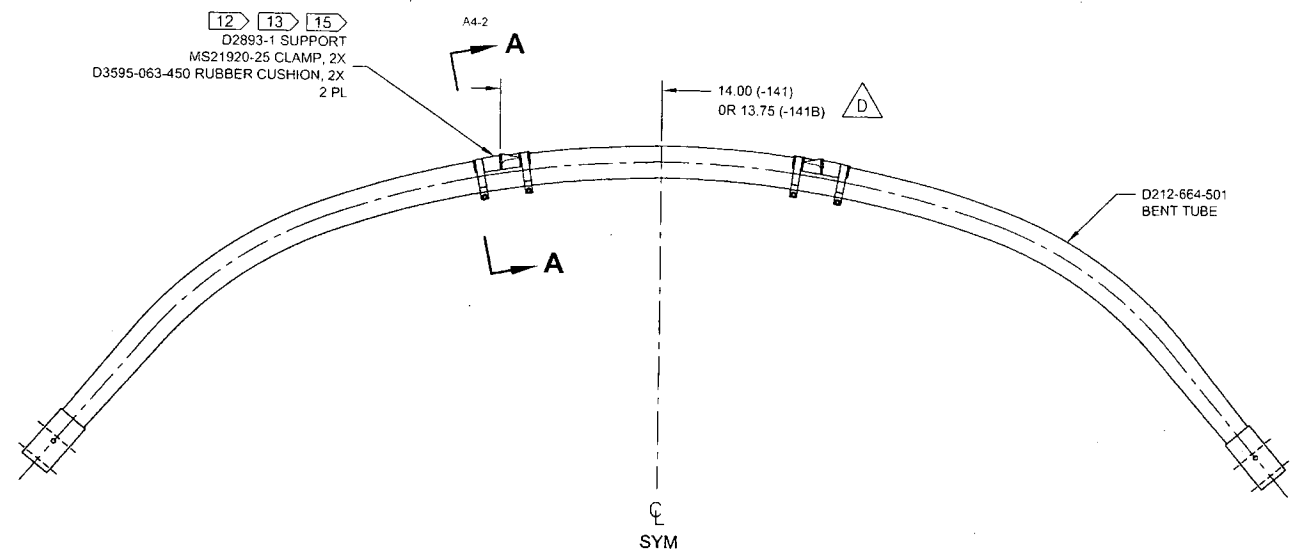
DEO ATTACHED

**RELEASED**  
2009-10-29  
M

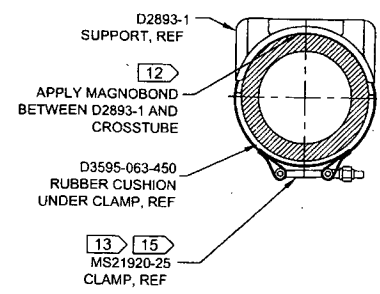
D	REFORMAT/REVISE GENERAL NOTES/PART LIST; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD -141B (ZN B4-2, D4-2); REMOVED REF & ADD TOLERANCES (ZN B4-3, C6-3, C8-3 & B6-3); RELOCATED FLAG #6 PER PAR 08-046 (ZN A5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4	RF	09.09.30
C	REMOVE -851 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIOTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	PH		
DRAWN	RF		
CHECKED	PH		
MFG. APPR.	PH		
APPROVED	PH		
DE APPR.	PH		
DATE	09.09.30		

<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D212-664-141	REV. D SHEET 1 OF 4
TITLE XTUBE ASSY (205/212/412 HI FWD)	SCALE NTS
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93807



**D212-664-141/-141B  
ASSEMBLY DETAIL**



**SECTION A-A** D5-2  
SCALE 4X

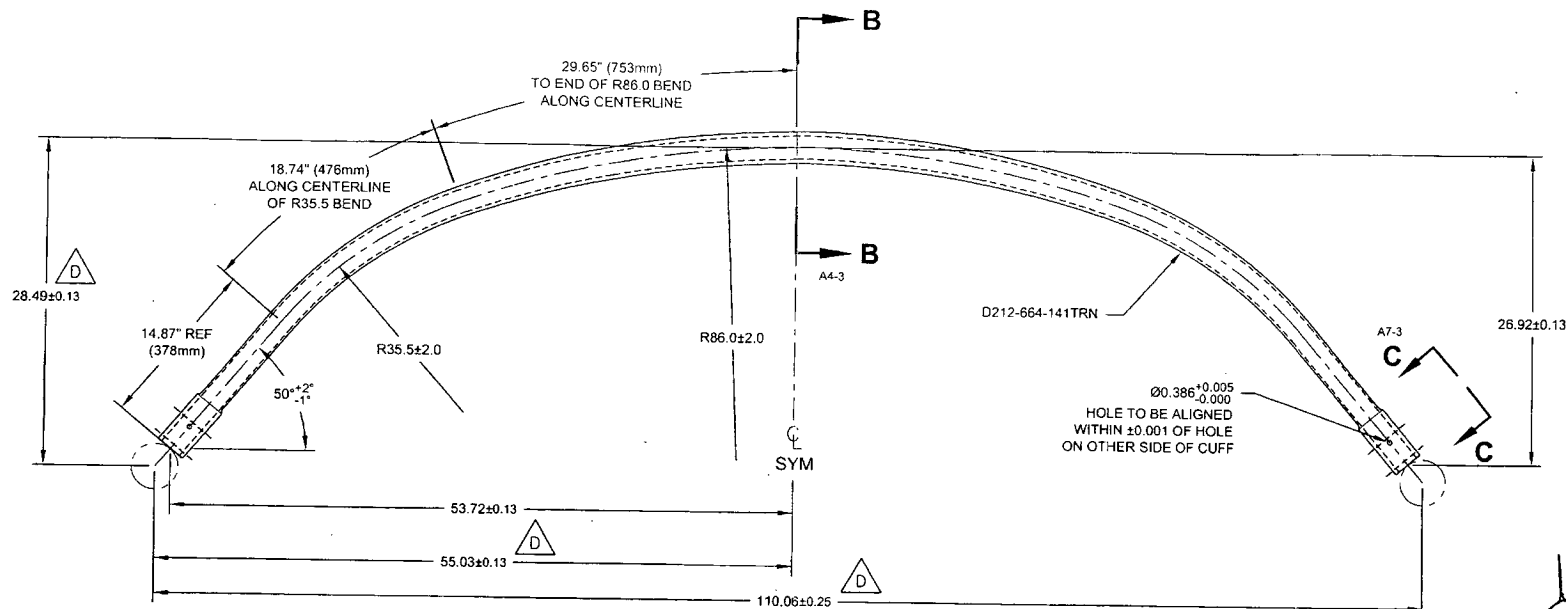
ECW#11-614  
11.07.26  
**UNDER REVIEW**  
11.9.13

**DEO ATTACHED**

**RELEASED**  
2009-10-29

DESIGN	PH	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	QP	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-141	SHEET 2 OF 4
APPROVED	MD	TITLE	SCALE
DE APPR.	HL	XTUBE ASSY (205/212/412 HI FWD)	NTS
DATE	09.09.30	<small>COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. IT IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

93807



**D212-664-501**  
**BENDING AND DRILLING DETAIL**

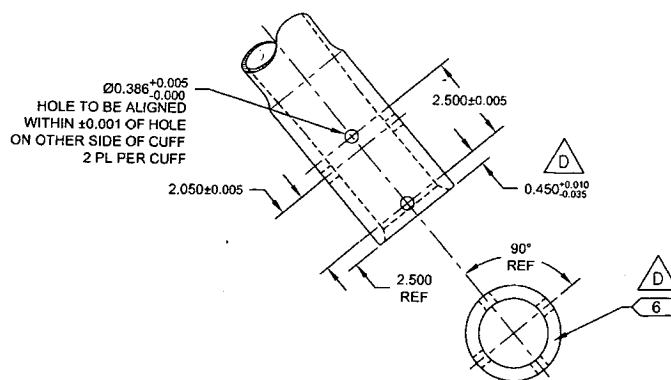


UNDER REVIEW

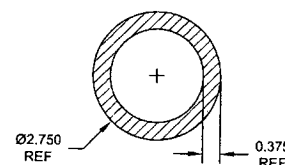
11.09.30

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2009-10-29



**VIEW C-C: CUFF DETAIL**  
SCALE 3X

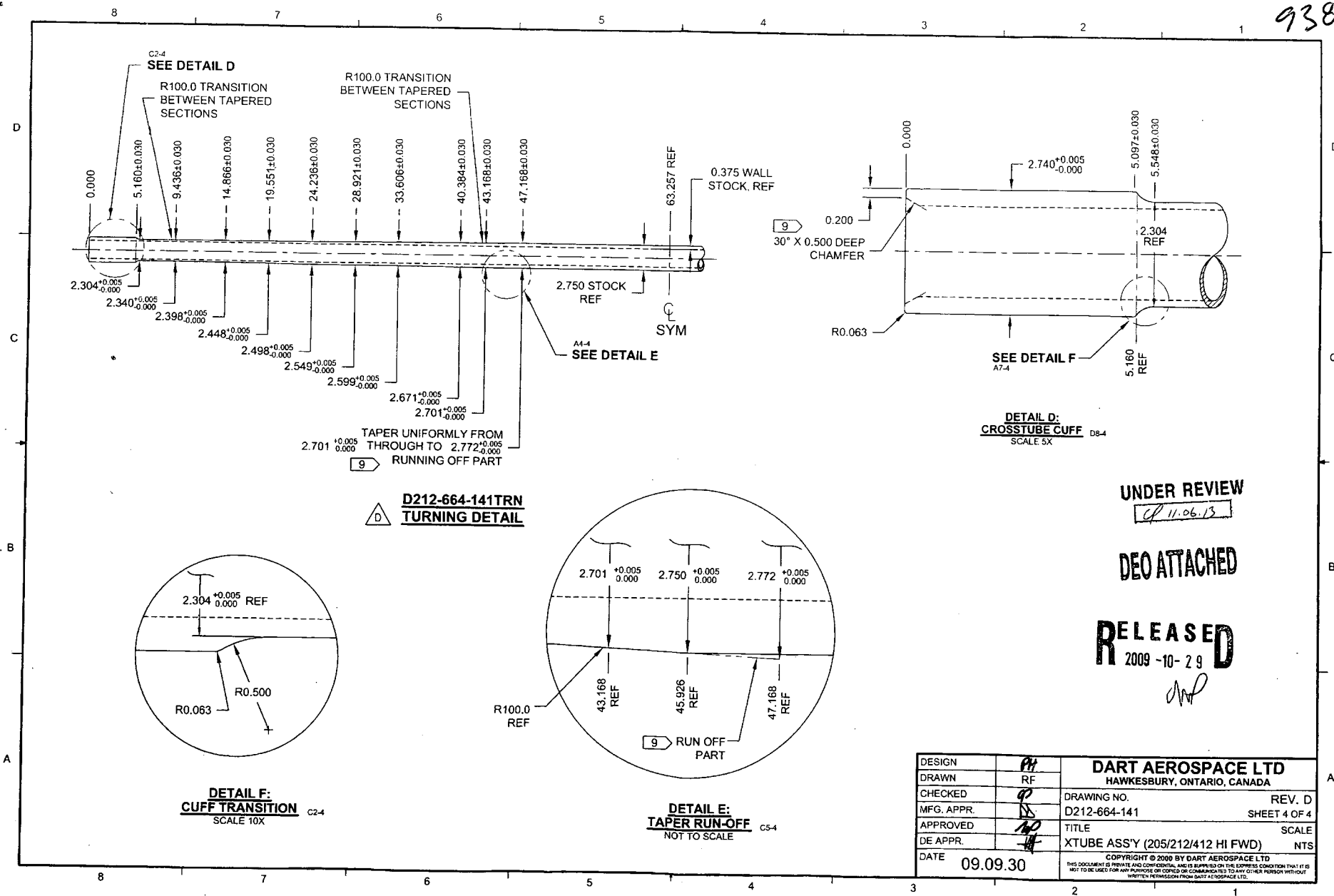


**SECTION B-B**  
SCALE 4X

DESIGN	PH	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	Q	DRAWING NO.	REV. D
MFG. APPR.	AS	D212-664-141	SHEET 3 OF 4
DE APPR.	TH	TITLE	SCALE
DATE	09.09.30	XTUBE ASS'Y (205/212/412 HI FWD)	NTS

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93807



UNDER REVIEW  
11.06.13

DEO ATTACHED

RELEASED  
2009-10-29  
*[Signature]*

DESIGN	PH	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	92	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-141	SHEET 4 OF 4
APPROVED	10	TITLE	SCALE
DE APPR.	11	XTUBE ASS'Y (205/212/412 HI FWD)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD	
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93807

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED	OP	MFG. APPR.	APPROVED	DE APPR.		
DATE 11.04.07	DATE 11.04.11		DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

**PURPOSE:**  
ADD AN INSPECTION WINDOW TO UNDERSIDE OF CROSSTUBE.

**CHANGE:**

NOTES 2 OF SHEET 1 IS AMENDED AS FOLLOWS:

**IS:**

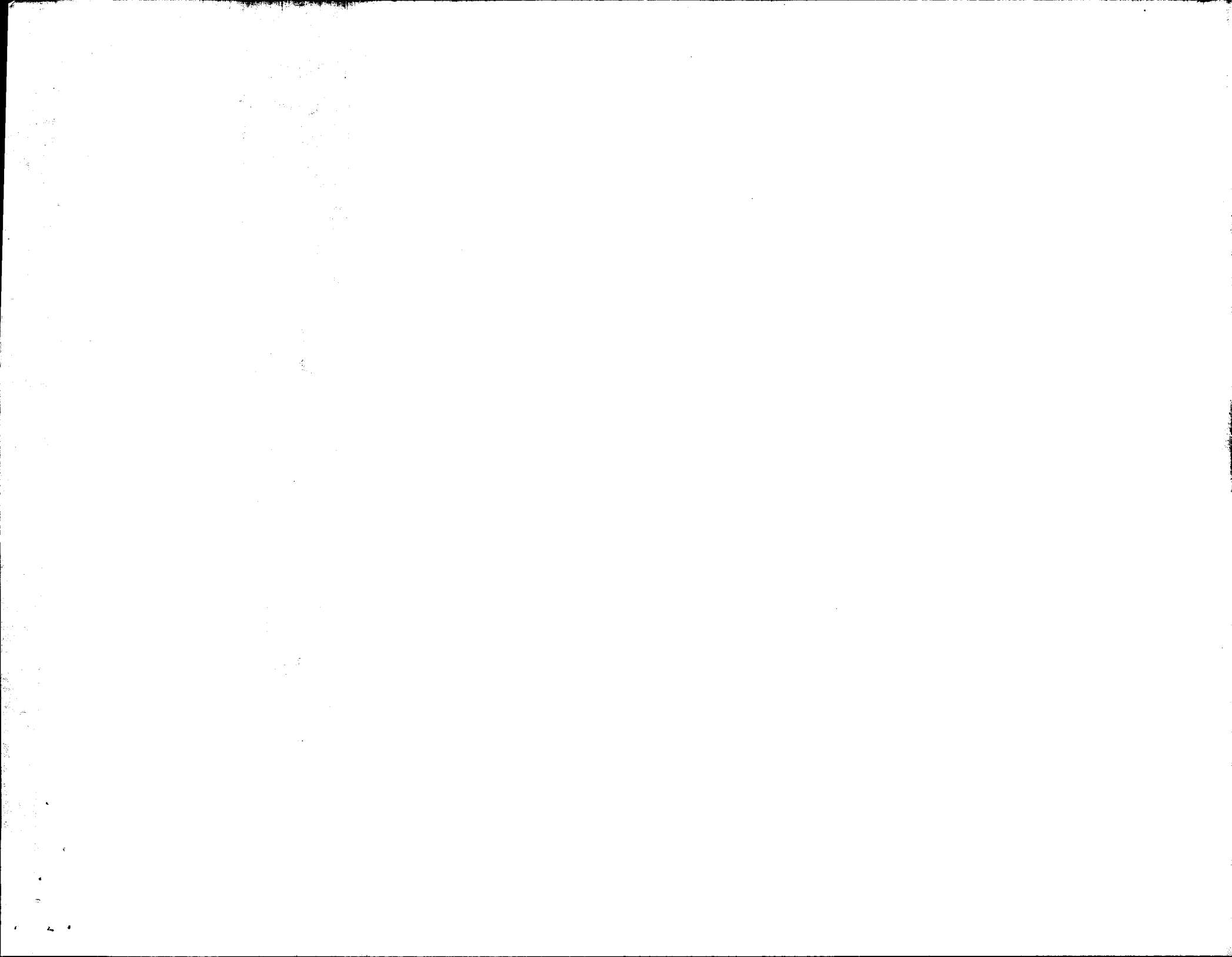
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
PAINT OUTSIDE PER DART QSI 005 4.2  
REMOVE MASKING AND APPLY CLEAR COAT

**WAS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2

**RELEASED**  
2011-04-18

**UNDER REVIEW**  
11.06.13  
11.07.28



93807

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN	CHECKED <i>CP</i>	MFG. APPR. <i>CE</i>	APPROVED <i>WAD</i>		DE APPR. <i>WAD</i>		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12		DATE 11.04.12		

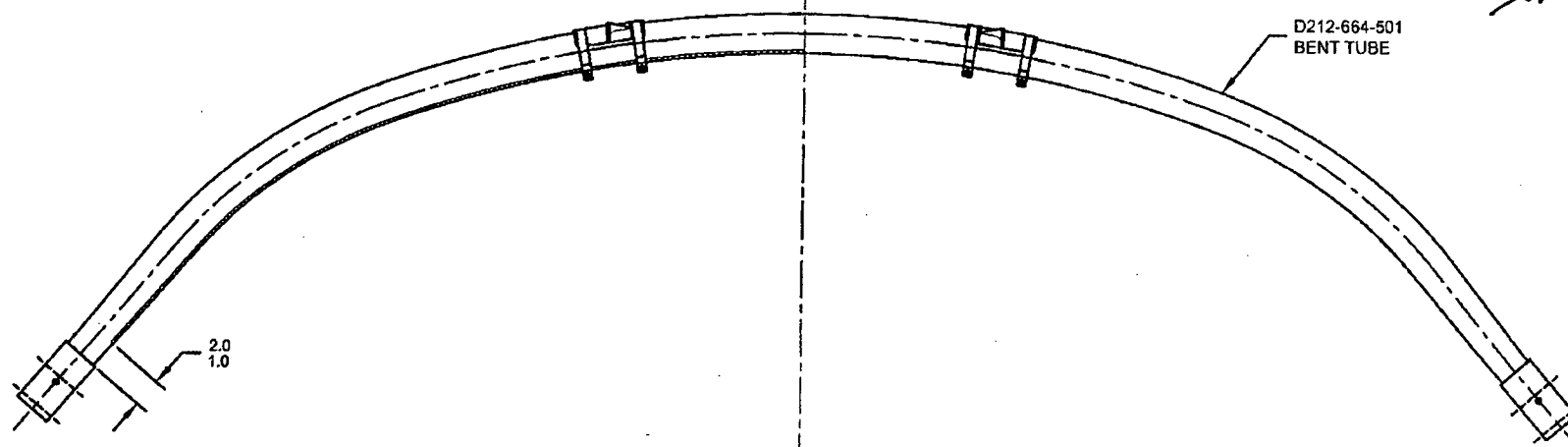
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WAS:

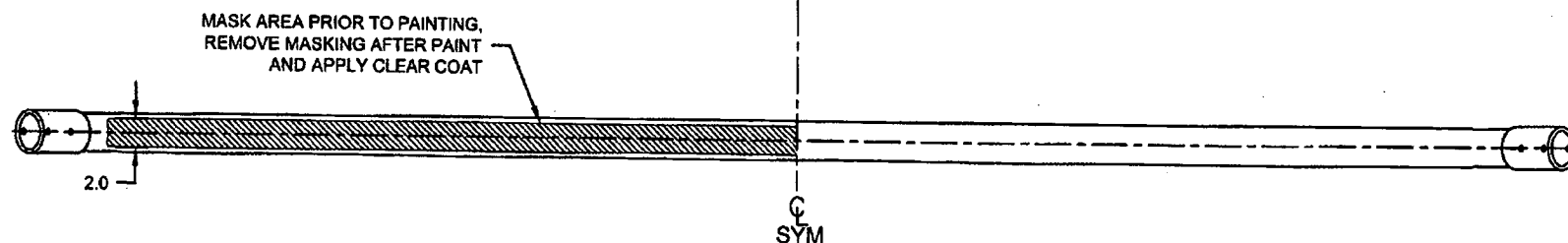
**UNDER REVIEW**

*9/11/06.13*

ECN# 11-614  
11.07.28



**D212-664-141/-141B**  
**ASSEMBLY DETAIL**





93803

DRAWING NO. D212-664-141	TITLE CROSSTUBE ASS'Y (205 HI FWD)	REV. D	<b>DART AEROSPACE LTD ENGINEERING ORDER</b>		D.E.O. NO. D212-664-141-D-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>UP</i>	CHECKED <i>ADS</i>	MFG. APPR. <i>AD</i>	APPROVED <i>MD</i>		DE APPR. <i>HH</i>		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/07/21		DATE 11.07.21		

**PURPOSE:**

REPLACE MAGNOBOND WITH PROSEAL.

**CHANGE:**

IS:

Item	Qty -141	Qty -141B	Part Number	Description
7	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2893-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED  
2011-07-28  
*MD*

93808

DRAWING NO. D212-664-141		TITLE XTUBE ASSY (205/212/412 HI FWD)		REV. D <b>DART AEROSPACE LTD ENGINEERING ORDER</b>		D.E.O. NO. D212-664-141-D-3		SHEET NO. SHEET 1 OF 1		SCALE NTS	
DRAWN AJS		CHECKED <i>qp</i>		MFG. APPR. <i>140</i>		APPROVED <i>140</i>		DE APPR. <i>HL</i>			
DATE 12.06.28		DATE 12.07.05		DATE 12.07.05		DATE 12.07.05		DATE 12.07.05			

**PURPOSE:**

ADD NEW CONFIGURATION WITH ANODIZED FINISH

**ADD -141F CONFIGURATION TO PARTS LIST AS SHOWN BELOW:**

Item	Qty -141	Qty -141B	Qty -141F	Part Number	Description
1	X			D212-664-141	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD)
2		X		D212-664-141B	CROSSTUBE ASSEMBLY (214 HIGH FWD)
			X	D212-664-141F	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD) (ANODIZED)
3	1	1	1	D6005-128	CROSSTUBE
4	2	2	2	D2893-1	SUPPORT
5	4	4	4	D3595-063-450	RUBBER CUSHION
6	4	4	4	MS21920-25	CLAMP (OR MS21920-26)
7	A/R	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

\*NOTE ITEM 7 HAS BEEN UPDATED IN ACCORDANCE WITH DEO D212-664-141-D-2

**AMEND NOTE 2 AS FOLLOWS:**

**IS:**

- 2) FINISH -141 & -141B ONLY: a) CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
 b) PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
 c) MASK UNDERSIDE OF CROSSTUBE AS SHOWN IN DEO D212-664-141-D-1  
 d) PAINT OUTSIDE PER DART QSI 005 4.2  
 e) REMOVE MASKING AND APPLY MATTE CLEAR COAT

- FINISH -141F: a) ANODIZE PER MIL-A-8625, TYPE II, CLASS 1.  
 b) ALODINE (DO NOT ETCH) PER QSI 005 4.1.2  
 c) PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
 d) MASK UNDERSIDE OF CROSSTUBE AS SHOWN IN DEO D212-664-141-D-1  
 e) PAINT OUTSIDE PER DART QSI 005 4.2  
 f) REMOVE MASKING AND APPLY MATTE CLEAR COAT

**\*NOTE:** BETWEEN FINISHING OPERATIONS EXTREME CARE MUST BE TAKEN  
 NOT TO CONTAMINATE OR DAMAGE FINISHED SURACES.

**WAS:** (UPDATED PER DEO D212-664-141-D-1)

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
 PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
 MASK UNDERSIDE OF CROSSTUBE AS SHOWN IN DEO D212-664-141-D-1  
 PAINT OUTSIDE PER DART QSI 005 4.2  
 REMOVE MASKING AND APPLY CLEAR COAT

**RELEASED**  
 2012-07-10  
*qp*





# LIQUID PENETRANT TEST REPORT

P- 10180

PAGE 1 OF 1

CLIENT Dart Aerospace DATE Dec-11-2012 TIME AM ☒ PM  
ATTENTION Linda, Chantale, Andy ACUREN JOB NO. 188-12-C0419  
ADDRESS 1270 Aberdeen St PO/VO No. \_\_\_\_\_  
Hawkesbury, on WORK LOCATION As Address  
ACCEPTANCE STD. Astm 1417/osi 027 REV./DATE 2008  
PROJECT Pt wet Fluorescent Liquid penetrant Inspection  
ITEM(S) EXAMINED -See Below

JOB DESCRIPTION \_\_\_\_\_ PROCEDURE NO. LT-002 REV./DATE 2009 TECHNIQUE NO. LT-002 REV./DATE 2009  
PART NO. \_\_\_\_\_ MATERIAL Aluminium 6061 THICKNESS \_\_\_\_\_  
SCOPE Performed a wet Fluor L.P.I. on 100% of the external surface on items mentioned below.

TEST DETAILS  
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMUL  
FAMILY BRAND Magneflux BLACK LIGHT S/N 15790 ☐ OUTPUT > 1000  $\mu$ W/cm<sup>2</sup> ☐ AMBIENT < 2  
PENETRANT ZL-6F MINIMUM DWELL TIME 45 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ 50  
PENETRANT REMOVER H2O MINIMUM DRY TIME >10 MIN. OTHER Lambing  
DEVELOPER SKD-S2 MINIMUM DWELL TIME 30 MIN. LIGHT METER S/N 1092866 CAL DUE DATE oct 08  
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE  
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL  
SURFACE TEMPERATURE ☐ < -4°C/20°F ☐ -4°C/20°F TO 10°C/50°F ☐ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS: ( ☐ METRIC ☐ IMPERIAL )

ITEM	COMMENTS	ACCEPT	REJECT
1	Crosstube Fuel High W/O ID 92707	✓	
2	Crosstube Low Stand High W/O ID 92744	✓	
3	Crosstube Fuel High W/O ID 92806	✓	
4	Crosstube Fuel High W/O ID 92807	✓	
5	Crosstube Low Stand Fuel W/O ID 92857	✓	

No Relevant Indications were detected As per  
Applicable Standard at the time of Inspection.

## Scope of Services

The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be considered representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a part of or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

## Standard of Care

In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

## SIGNATURES

CLIENT REPRESENTATIVE Andy Sheldon ASheldon DTR # E-12030  
TECHNICIAN (SIGNATURE): Alexandre Michaud SIGNATURE  
NAME (PRINT): Alexandre Michaud 1<sup>ST</sup> TECHNICIAN  
CGSB LEVEL II SNT LEVEL II CGSB LEVEL \_\_\_\_\_ SNT LEVEL \_\_\_\_\_  
CGSB REG. NO. 10148 CGSB REG. NO. \_\_\_\_\_  
REPORT REVIEWED BY: \_\_\_\_\_ NAME \_\_\_\_\_ INITIA \_\_\_\_\_